FOR INSTRUCTIONS, SEE BACK OF FORM  DISCLOSURE SUMMARY PAGE	FORM DR-2 DISCLOSURE
COMMITTEE NAME (Must be same as on Statement of Organization) BURKEN FOR STATE SENATE	(Rev. 01/2001) REPORT
150K) 1515 5777 C	For Office Use Only
IMPORTANT: Indicate type of committee you are reporting for:	Comm. #
(1)Statewide/Legislative Candidate (2)Statewide PAC (3)State Party (4)County/Local Candidate (5)County PAC (6)Ballot Issue/Franchise Committee (7)County/City Central Committee	Audited
( 8 )Support Slate of Candidates	Computer WRS
CANDIDATE COMMITTEES ONLY:	- TIP
Candidate Name Political Party	ETHES & CAMPAIGN
JEROME 7 BURKEN BEPUBLICAN	SCLOSURE ECAPD
Office Sought District (if Senate or House)	29 2002
STATE SENATUR 18 FLED	Pm 12.26
Myma M Neymann 563-349-6604 SIGNATURE OF TREASURER (or person filing this report) TELEPHONE	DATE SIGNED
Claim one of Meadoner (of person lining this report)	DATE SIGNED
Routine Penalties Due For Late Filed Reports Range from S	\$20 to \$800
SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:	
I AM FILING AN OCTOBER 39, 3002 REPORT FOR ANA (1) ELECTION	I/(2)NON-ELECTION YEAR.
(report date) Indicate of	one 🚺
CHECK IF AMENDMENT TO REPORT DATED OCTOBER 39, 2002. [Local C	ommittees, enter Date of Election
	& Local Committees, enter County in lection is held
( rod must contained to me reports drift a Notice of Dissolution is med.)	
STATEMENT OF CASH ON HAND	•
CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held	
by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.)	5263.83
ADD TOTAL MONEY TAKEN IN THIS PERIOD	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	5076.20
Schedule F: Loans Received total (Attach Schedule F)	
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	
(Schedule H applies to Candidates' Committees Only)	
SUB-TOTAL\$	10340,03 8830.80
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	^^ ^
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	8830.80
Schedule F: Loan Repayments total (Attach Schedule F)	
CASH ON HAND at the end of this reporting period (if final report, balance must	
CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)\$	
	1509.23
be zero) (Attach DR-3)\$	3148.66
be zero) (Attach DR-3)	1509,23 3148.66 7511,39
be zero) (Attach DR-3)	1509,23 3148.66 7511,39
be zero) (Attach DR-3)	1509,23 3148.66 7511,39

COMMITTEE NAME (Must be same as on Statement of Organization)

BURKEN FOR STATE SENATE

NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

# DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD (DO NOT INCLUDE LOANS — SHOW LOANS ON SCHEDULE F)

D INCURRED (Rev. 08/98) INDEBTEDNESS

IF AMENDING

FORM

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period., regardless of whether an invoice has been received.

(for Schedule D)

DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*			
10/29/02	CLINTON PRINTING	VARIOUS ITEMS PRINTED FOR CAMPAIN	s u 1641,06			
AUG 9 TARU OCT 16 <sup>th</sup>	JERUME BURKEN 1410 MILES @ 364	MILEMBE	507,60			
			s			
	SUB-TOTAL					
	TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD					

CANDIDATE COMMITTEES NOTE:

\*If

at figure is unknown, show "estimated" beside the figure.

<sup>\*</sup>incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

FOR INSTRUCTIONS, SEE BACK OF FORM	Terroria and a		FORM	
DISCLOSURE SUMMARY PAG	GE MARKET		DR-2	DISCLOSURE
COMMITTEE NAME (Must be same as on Statement of Orga	anization)	一	(Rev. 05/2002)	REPORT
Burken for State Senate			For Office Use O	nlv
IMPORTANT: Indicate type of committee you are reporting for:	7		Comm. #	398
IMPORTANT: Indicate type of committee you are reporting for: $1$	J		Indexed	_و_
(1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party		1 1		
(5)County PAC (6)Ballot Issue/Franchise Committee (7)County/City (8)Support Slate of Candidates	Jentral Committee		Computer	
CANDIDATE COMMITTEES ONLY:				
Candidate Name	Political Party	4		
Jerome F. Burken	Republican		Üi.	THE SAME
Office Sought	District (if Senate or House	- -		
State Senator	13	"	NOV -	1 2002
			p n	7 10.30
min an m	172-26	2604	FILED	3.4
Myma M Meyma wn SIGNATURE OF TREASURER (or person filing this report)	TELEPHONE	2009		SIGNED
SIGNATORE OF TREASURER (of person filling this report)	TELEPHONE		DATES	SIGNED
Routine Penalties Due For Lat	e Filed Reports Range	from S	20 to \$800	
SEE INSTRUCTIONS ON BACK AND COMPLETE THE	FOLLOWING SENTENCE	<b>:</b>		
	_ REPORT FOR AN/A (1) EL		/(2)NON-ELEC	TION VEAD
(report date)		ndicate o		TION TEAK.
• • • • • • • • • • • • • • • • • • • •				
CHECK IF AMENDMENT TO REPORT DATED		Local Co	ommittees, enter (	Date of Election
		Court	P. Land Committee	an antas Caustulia
Check if this is final (termination) report and attach Notice (You must continue to file reports until a Notice of Dis			ection is held	es, enter County in
(102 1100 00 10 10 10 10 10 10 10 10 10 10 1				
STATEMEN'	T OF CASH ON HAND			
CASH ON HAND at the beginning of the reporting period. (The	nis is the total of all monies he	ld		
			5,263.83	
by the committee. This amount <b>MUST</b> be the same of the last reporting period, or must be zero if this is to	first report filed.)		·	
ADD TOTAL MONEY TAKEN IN THIS PERIOD			5 076 20	
Schedule A: Cash Contributions total (Attach Sched	ule A) (*also see in-kind belov	v)	5,076.20	
Schedule F: Loans Received total (Attach Schedule	F)			
Schedule H: Total Sales of Campaign Property (Atta	ach Schedule H)			
(Schedule H applies to Candidates' Com	mittees Only)			
	SUB-TO	TAL	10,340.03	
SUBTRACT TOTAL MONEY SPENT THIS PERIOD				
Schedule B: Expenditures total (Attach Schedule B)	(**also see debts and loans b	elow)	8,830.80	
Schedule F: Loan Repayments total (Attach Schedu	·	•		
CASH ON HAND at the end of this reporting period (if final re	nort halance must			
be zero) (Attach DR-3)	port, balance must		1,509.23	
**UNPAID BILLS (From Schedule D - Attach Schedule D)				
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Sche	dule E)		7,511.39	
**OUTSTANDING LOANS (From Schedule F - Attach Schedu	ıle F)		S	
CANDIDATE COMMITTEES ONLY:				
CONSULTANT BREAKDOWN (Schedule G Attached?)			YI	ES NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

#### For Instructions, See Back of Form

#### **CONTRIBUTIONS -- MONEY TAKEN IN**



(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)	
Burken for State Senate	

SCHEDUL <b>A</b> (Rev. 06/9		MONETARY RECEIPTS
	—	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER I N THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**CAUTION:** Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
10/16/02	ID# CK# 1603	H. Paul Hartel  2538 35th St. Maquoketa, Iowa 52060	None	\$ 25.00	
10/16/02	ID# CK# 2387	John K. Howe 2133 380th Ave. Clinton, la 52732	None	25.00	
10/16/02	ID# CK# 4167	Donna Manikowski 803 Country Club Dr. Maquoketa, la 52060	None	10.00	
10/16/02	ID# CK# 1942	Werner Hellmer 1141 Main St. Dubuque, la 52001	None	50.00	
10/16/02	ID# CK# 3061	Gregory A. Banker 2700 Willadsen Clinton, la 52732	None	100.00	
10/16/02	ID# CK# 4227	Gerald D. Baker 736 7th Avenue N. Clinton, la 52732	None	100.00	
10/17/02	ID# CK#	Check #142 to Iowa Newspaper Assn dated 10/10/02 voided	None	281.20	
	ID#				
	ID# CK#				
	ID# CK#				
	<u> </u>	<u> </u>	SUB-TOTAL	s 591.20	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If sumame of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page \_\_\_\_\_ of \_\_\_\_\_

TOTAL (if last page of this schedule)

#### For Instructions, See Back of Form

#### **CONTRIBUTIONS -- MONEY TAKEN IN** (Including candidate's personal funds)



SCHEDULE
Α
(Rev. 06/97)

MONETARY **RECEIPTS** 

☐ CHECK THIS BOX IF AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization) Burken for State Senate

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER I N THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

	DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
	<b>1</b> 0/19/02	ID# CK# 639	DeWitt Republican Woman's Club DeWitt, Iowa 52742	None	\$ 50.00	
	10/19/02	ID# CK# 1957	Larry R. Villa 1824 2nd Ave. S. Clinton, Iowa 52732	None	25.00	
]	10/19/02	ID# CK# None	Miscellaneous cash contributions less than \$25 each	None	100.00	
	10/19/02	ID# <sub>6300</sub> CK# 5021	"FAS PAC" Fareway Stores, Inc. PAC 2600 E. 8th St. Boone, IA 50036	None	100.00	
	10/24/02	ID# CK# 2536	Greg A. Burken 4115 210th St. Clinton, IA 52732	Son	200.00	
	10/18/02	ID#	Republican Party of Iowa 612 East 9th Street Des Moines, IA 50309	None	4,000.00	
	10/20/02	ID# CK#	BAVID J. UGARPH 946 5. 100 St. CLINTON 1A 52732	NONE	10 00	
		ID#				
		ID# CK#				
		ID# CK#				
1		<u> </u>		SUB-TOTAL		

SUB-TOTAL

TOTAL (if last page of this schedule)

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM



### **EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

**STATE PAC COMMITTEES: NOTE:** FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 09/97)	MONETARY EXPENDITURES
	CK THIS BOX IF NDING FORM

COMMITTEE NAME	(Must be same as on	Statement of Organization)
----------------	---------------------	----------------------------

Burken for State Senate

10/16/02	DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/16/02   CK# 146   S200 30th   Davenport, IA 52802   1,610.00	10/16/02		%Republican Party of Iowa 612 East 9th Street	Republican advertisements	\$ 1,621.20
10/16/02   CK# 147   Iowa Newspaper Assn %Republican Party of Iowa 612 E. 9th St., Des Moines IA 50309   Inward 10/22/02   ID#	10/16/02		5200 30th	Radio advertisements	1,610.00
10/22/02   CK# 148   612 E. 9th St., Des Moines IA 50309   1,015.20   1,015.20	10/16/02	ĺ		Overnight check #145	17.10
10/22/02   CK# 149   S200 30th   Davenport, IA 52802   S200 30th   Davenport, IA 52802   S200 30th   Davenport, IA 52732   Overnight checks #148 & 149   CK# 150   CK# 151   Victory Enterprises   S200 30th   Davenport, IA 52802   CK# 151   CK# 151   Davenport, IA 52802   CK# 151   CK# 151   CK# 151   CK# 151   CK# 152802   CK# 151   CK# 151	10/22/02		%Republican Party of Iowa	Republican advertisements	1,015.20
10/22/02   CK# 150   Clinton, IA 52732   Clinton, IA 52732   27.30	10/22/02		5200 30th	Radio advertisements	4,340.00
10/23/02 CK# 151 Victory Enterprises 5200 30th Davenport, IA 52802 200.00	10/22/02			Overnight checks #148 & 149	27.30
	10/23/02		5200 30th	Radio advertisements	200.00
SUB-TOTAL \$ 0 000 00					

SUB-TOTAL

\$ 8,830.80

TOTAL (if last page of this schedule)

8,830,80

# THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i).)

FOR INSTRUCTI	ONS, SEE BACK OF FORM		SCHEDU <b>D</b>	ł
COMMITTEE N Burken for S	INCURRED /98) INDEBTEDNESS			
NOTE: Debts p	CHECK THIS BOX FAMENDING ORM			
DEBTS/OBI (DO NOT IN	red debt" is a debt for services ordered or but not paid for by the e reporting period., is of whether an invoice received.			
DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS SERVICES PROVIDED O PURCHASED		BALANCE OWED AT CLOSE OF REPORTING PERIOD*
10/29/02	Clinton Printing Co. P.O. Box 64 Clinton, IA 52732	Various printed items Estimate only actual amount not yeet known		1,500.00
	\$			
	\$ 1,500.00			

## CANDIDATE COMMITTEES NOTE:

"If actual figure is unknown, show "estimated" beside the figure.

\*Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, found-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

\_ of \_1

(for Schedule D)

FOR INSTRUCTIONS, SEE BACK OF FORM	SCHEDULE	
COMMITTEE NAME (Must be same as on Statement of Organization)	(Rev. 06/97)	IN KIND CONTRIBUTIONS
Burken for State Senate		
	I — ::	K THIS BOX IF DING FORM

	DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	√ IF FOR FUND-RAISER CONTRIBUTION
	10/21/02	Republican Party of Iowa 621 E. 9th Des Moines, IA 50309	None	Postage	6,710.00	
	10/21/02	Republican Party of Iowa 621 E. 9th Des Moines, IA 50309	None	Postage	503.25	
	10/24/02	Republican Party of Iowa 621 E. 9th Des Moines, IA 50309	None	Printing	298.14	
i						
:						
,	SUB-TOTAL					
	TOTAL (if last page of this schedule)				<b>\$</b> 7,511.39	
				Solitable)		

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page \_\_\_\_\_ of \_\_\_\_ (for Schedule E)